

L03000051950

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

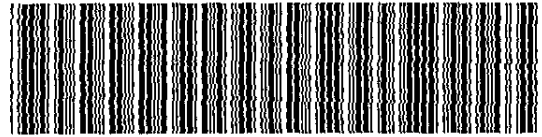
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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12/05/03--01019--004 **125.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

03 DEC -4 PM 2:15

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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Jeff Hale Painting Limited Liability Company
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jeffrey L. Hale

(Name of Person)

Jeff Hale Painting Limited Liability Company

(Firm/Company)

224 Tavernier Drive

(Address)

Tavernier FLA. 33070

(City/State and Zip Code)

For further information concerning this matter, please call:

Jeffrey Hale

(Name of Person)

at (305) 852-3077

(Area Code & Daytime Telephone Number)

305 394-3620 (cellular)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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STREET ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:

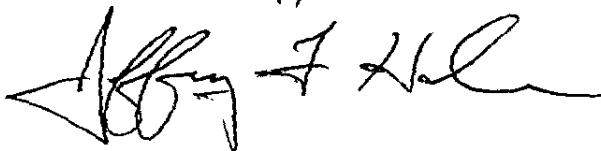
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Florida Dept. of State
Registration Section
Division of Corporations

12/1/03

Please be advised to make my effective
date of Jeff Hale Painting, Limited Liability Company
five days prior to this filing. Today's date
is 12/1/03, which I believe would make it
11/26/03.

Thank you for your help ASSISTANT
Sincerely,



Jeffrey L. Hale
224 Tavernier Drive
Tavernier Florida
33070

305-852-3077
305 394-3620 (Cellular)

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03 DEC -1 PM 2:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12-1-03

signed before me this 1ST day of December 2003



M. KAY DOUGHERTY
MY COMMISSION # DD 214973
EXPIRES: September 20, 2007
Bonded Thru Budget Notary Services

M Kay Dougherty

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

Jeff Hale Printing, Limited Liability Company

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

224 Tavernier Drive
Tavernier Fla
33070

Mailing Address:

224 Tavernier Drive
Tavernier Fla
33070

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

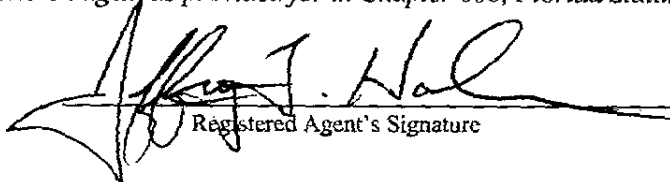
Jeffrey L. Hale
Name
224 Tavernier Drive
Florida street address (P.O. Box NOT acceptable)
Tavernier FLORIDA 33070
City, State, and Zip

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes..


Registered Agent's Signature

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

Jeffrey L. Hale
224 Tavernier Drive
Tavernier FL 33070

(Use attachment if necessary)

03 DEC -4 PM 2:15
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:


Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Jeffrey L. Hale
Typed or printed name of signer

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)